

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Claes Wallen  
Serial No. : 10/063,288  
Filed : April 8, 2002  
Art Unit : 3761  
Examiner : Leslie R. Deak  
Confirmation No.: 2442  
Notice of Allowance Date: October 28, 2008  
Title : DEVICE AND METHOD FOR MIXING MEDICAL FLUIDS

**MAIL STOP ISSUE FEE**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**RESPONSE TO NOTICE OF ALLOWANCE**

In response to the Notice of Allowance mailed October 28, 2008, enclosed is a completed issue fee transmittal form PTOL-85b.

All fees are being paid concurrently herewith on the Electronic Filing System (EFS) by way of Deposit Account authorization. Please apply all charges or credits to Deposit Account No. 06-1050.

Respectfully submitted,

Date: 1/27/09

/Kirk Dorius/

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I hereby certify that this paper was filed with the Patent and Trademark Office using the EFS-WEB system on this date: January 27, 2009

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26201 7590 10/28/2008

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

**FISH & RICHARDSON P.C.  
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Minneapolis, MN 55440-1022**

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/063,288	04/08/2002	Claes Wallen	19497-0011001	2442

TITLE OF INVENTION: DEVICE AND METHOD FOR MIXING MEDICAL FLUIDS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$1810	01/28/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
DEAK, LESLIE R.	3761	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Fish & Richardson P.C.  
2. \_\_\_\_\_  
3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE (CITY and STATE OR COUNTRY)

**Carmel Pharma AB**

**SWEDEN**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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(Authorized Signature) /Kirk Dorius/

(Date) January 27, 2009

Typed or Printed Name Kirk Dorius

Registration No. 54,073

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